ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	Selam M		08-03-01
O.I.P.E. CLASSIFIER		×/5	2/5/01
FORMALITY REVIEW	CH	1119	09-10-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	...... Rejected	N	...... Non-elected
=	...... Allowed	I	...... Interference
—	(Through numeral)... Canceled	A	...... Appeal
÷	...... Restricted	O	...... Objected

Claim		Date							
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If more than 150 claims or 10 actions
staple additional sheet here

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